

PART B - FEE(S) TRANSMITTAL

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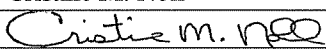
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 120 SOUTH RIVERSIDE PLAZA, 22ND FLOOR
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Cristine M. Noll	(Depositor's name)
	(Signature)
July 22, 2011	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/582,718	06/12/2006	Daisuke KUMAKI	0553-0505	6557

TITLE OF INVENTION:

LIGHT EMITTING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$1510	\$0	07/25/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
CAO, PHAT X	2814	257-040000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- | | |
|---|---------------------|
| 1 | Husch Blackwell LLP |
| 2 | |
| 3 | |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Semiconductor Energy Laboratory Co., Ltd.

JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee - **Previously Paid**
☐ Publication Fee (No small entity discount permitted)
 10 (Previously Paid)
☒ Advance Order - # of Copies **For**

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **23-0920**

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature 

Date **July 22, 2011**

Typed or printed name **Mark J. Murphy**

Registration No. **34,225**

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